

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>7/28/02</u>		2 Serial/Patent # <u>09/871752</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
	Filing			\$						
	Amendment			\$						
	Extension of Time			\$						
	Notice of Appeal/Appeal			\$						
<input checked="" type="checkbox"/>	Petition			\$ <u>130</u>						
	Issue			\$						
	Cert of Correction/Terminal Disc.			\$						
	Maintenance			\$						
	Assignment			\$						
	Other			\$						
		7 TOTAL AMOUNT OF REFUND		\$						
		8 TO BE REFUNDED BY:								
10 REASON:		Treasury Check								
	Overpayment	Credit Deposit A/C #:								
	Duplicate Payment	9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">1</td><td style="width: 20px; height: 20px;">1</td><td style="width: 20px; height: 20px;">--</td><td style="width: 20px; height: 20px;">1</td><td style="width: 20px; height: 20px;">4</td><td style="width: 20px; height: 20px;">10</td></tr></table>			1	1	--	1	4	10
1	1	--	1	4	10					
<input checked="" type="checkbox"/>	No Fee Due (Explanation):									
<div style="font-family: cursive; font-size: 1.2em; margin-top: 10px;"> Office has placed charge of app </div>										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>GILSON J</u>		TITLE: <u>S. ATT</u>								
SIGNATURE: <u>[Signature]</u>		PHONE: <u>305-9149</u>								
OFFICE: <u>TO OP</u>										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>Alicia Kelly</u>		DATE: <u>8/5/02</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: